THE WEEKEND EFFECT

Evaluating recovery following colorectal surgery

SOFIE LITSFELDT, MSC, STAFF NURSE
UHSUSSEX, NIHR HCP INTERN 2026

University Hospitals Sussex NHS Foundation Trust

NIHR | Applied Research Collaboration Kent, Surrey and Sussex

SERVICE EVALUATION

Data collection: April 1st 2025-March 31 2026.

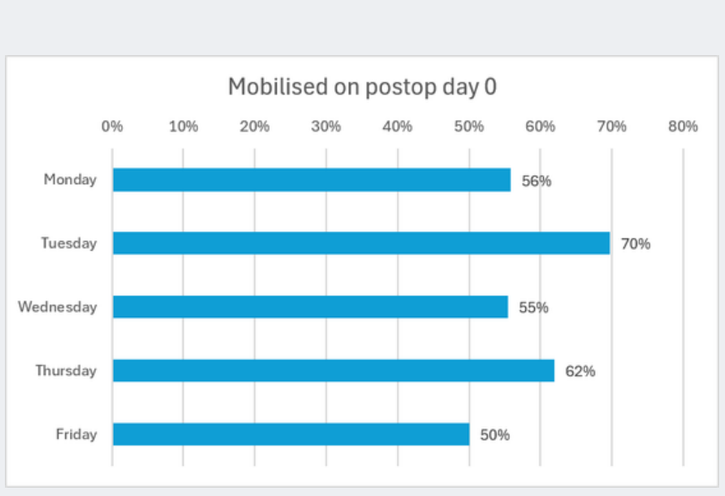
Worthing Hospital, University Hospitals Sussex NHS Foundation Trust

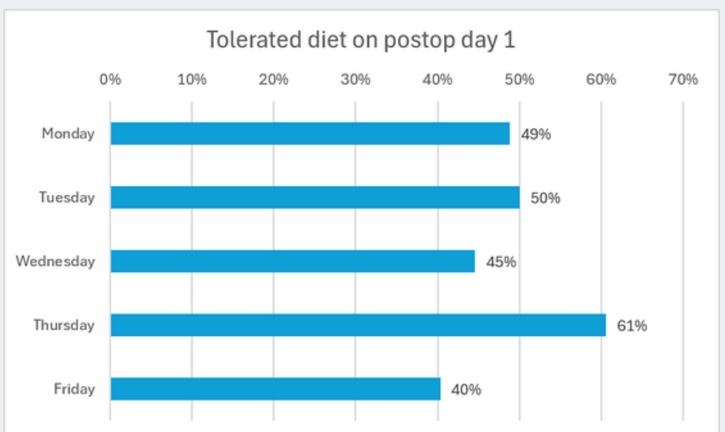
N=316

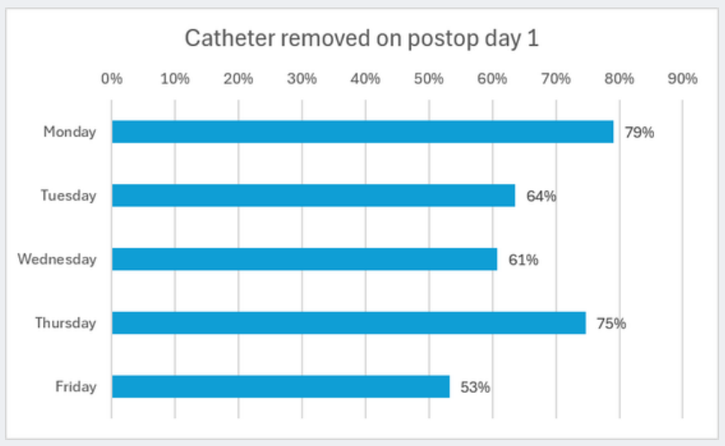
Most common procedures: Anterior resection (n=105) and Right hemicolectomy (n=103)

Most common incision: Laparoscopic (n=266)

Median patient age: 69 years
Mean op duration: 3 hrs 47 min







FIGURES SHOWING % OF PATIENTS REACHING TARGETS ACCORDING TO THE ENHANCED RECOVERY PROTOCOL

THE ENHANCED RECOVERY PROTOCOL (ERP) FOR COLORECTAL SURGERY

The protocol consists of a range of standardised evidence-based items during the perioperative pathway for elective surgery. The approach has been shown to reduce rates of morbidity, improve recovery and reduce length of hospital stay. Some important parts of the program during the postoperative phase are early resumption of mobility and oral intake, and timely removal of urinary catheters (Gustafsson et al., 2025).

THE PROBLEM

Previous research has shown that despite some patients being considered clinically safe to discharge, weekend discharges were generally avoided. This led to increased length of stay for patients depending on what day of the week a patient had their operation. A suggested cause is that the availability of senior and specialist staff able to discharge the patient is restricted during the weekend (Joshi et al., 2023).

AIMS

Staff experience of standardised perioperative care is linked to ERP success (Cardell et al., 2021). This service evaluation aims to further analyse the impact of the weekend for colorectal surgery patients by evaluating whether there are differences in when key goals linked to the Enhanced Recovery Protocol are met, depending on the day of the week. Patients having an operation on a Friday could potentially reach their recovery targets later, since their first postoperative day is on a Saturday. Knowledge about potential differences is an important step to improve quality and eliminate inequalities in access to specialist care.

Cardell, C., Knapp, L., Cohen, M., Ko, C., & Wick, E. (2021). Successful implementation of enhanced recovery in elective colorectal surgery is variable and dependent on the local environment. Annals of Surgery.
Gustafsson, U., Rockall, T., Wexner, S., How, K., Emile, S., Marchuk, A., Fawcett, W., Sioson, M., Riedel, B., Chahal, R., Balfour, A., Baldini, G., de Groof, E., Romagnoli, S., Coca-Martinez, M., Grass, F., Brindle, M., & Hübner, M. (2025). Guidelines for perioperative care in elective colorectal surgery: Enhanced Recovery After Surgery (ERAS) Society recommendations 2025. Surgery.
Joshi, N., Warren, L., Guest, L., Chia, J., Martin, A., Mundy, J., & McFall, M. (2023). The impact of the weekend on delayed hospital discharges for colorectal ERP patients. International Journal of Scientific Research.